

# CLAIMS ONLY

Application Number

10/668,108

Filing Date

Applicant(s)

BEST AVAILABLE COPY

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2		1				
3	1					
4		1				
5	1					
6	1					
7	1					
8	1					
9	1					
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49						
50						
Total indep	8					
Total depend	2					
Total claims	10					

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	Indep	Depend	Indep	Depend	Indep	Depend
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100						
Total indep						
Total Depend						
Total Claims						